



TRANSMITTAL FORM

to be used for all correspondence after initial filing)

Attorney Docket No. 120074
Application Number 09/922,240
Filing Date AUGUST 3, 2001
First Named Inventor MICHAEL A. GREENBERG
Group Art Unit 2164
Examiner

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FEB 05 2002
Technology Center 2100

ENCLOSURES (check all that apply)

<input type="checkbox"/> Amendment/Response to Restriction/Election Req.	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Drawings:	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input checked="" type="checkbox"/> Post Card Receipt
<input type="checkbox"/> Extension of Time Request (duplic)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Declaration and Change of Correspondence Address	<input type="checkbox"/>
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement, PTO-1449, with 10 references	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.		

CALCULATION OF FEE

				Small Entity		or	Large Entity	
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate		Rate	Add'l Fee
Total		Minus			x \$9=		x \$18=	
Indep.		Minus			x \$42=		x \$84=	
First Presentation of Multiple Dep. Claim					+\$140=	---	+\$280=	
					total add'l fee	\$ 0	total add'l fee	\$ 0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 Cardinal Law Group 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature		Date:	JANUARY 22, 2002

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: JANUARY 22, 2002

Signature	 FRANK C. NICHOLAS (33,983)	Date:	JANUARY 22, 2002
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